KOLAR Document ID: 1596490

**Notice:** Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

## Kansas Corporation Commission Oil & Gas Conservation Division

## WELL PLUGGING RECORD K.A.R. 82-3-117

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

OPERATOR: License #:			AF	PI No. 1	5		
Name:				Spot Description:			
Address 1:			_		Sec Tv	vp S. R East West	
Address 2:				Feet from North / South Line of Section Feet from East / West Line of Section			
City:							
Contact Person:				Footages Calculated from Nearest Outside Section Corner:			
Phone: ( )					NE NW	SE SW	
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic  Water Supply Well Other: SWD Permit #: Gas Storage Permit #:				County: Well #: Date Well Completed:			
							Is ACO-1 filed? Yes No If not, is well log attached? Yes No
Producing Formation(s): List A	II (If needed attach another	sheet)	by	:		(KCC <b>District</b> Agent's Name)	
Depth to Top: Bottom: T.D				Plugging Commenced:			
Depth to	Top: Botto	m: T.D		Plugging Completed:			
Depth to	Top: Botto	m:T.D	' '	agging	Completed.		
Show depth and thickness of a	all water, oil and gas forma	ations.					
Oil, Gas or Water	Oil, Gas or Water Records			ng Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size		Setting Depth	Pulled Out	
cement or other plugs were us		-				ds used in introducing it into the hole. If	
Plugging Contractor License #: Na			Name:				
Address 1:			Address 2: _				
City:			Sta	ate:		Zip:+	
Phone: ( )							
Name of Party Responsible fo	r Plugging Fees:						
State of	County, _		, s	SS.			
			Г	_	nployee of Operator or	Operator on above-described well,	
	(Print Name)			=[]	inproyee or Operator or	Operator on above-described well,	

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and the same are true and correct, so help me God.

-

CUST

E76902 9/21/21 BE 552 # .. .. # INV DATE CLERK TERM

TIME \*\*\*

EXTENSION 714.45	714.45 0.00 714.45 62.51 776.96
G. PRICE	776.96 TAXABLE NON-TAXABLE SUB-TOTAL SUB-TOTAL TOTAL INVOICE
PORTLAND CEMENT  Last burn 35  Lost burn 35  Lost burn 35  Lost burn 35	** PAYMENT RECEIVED **  ** PAID IN FULL **  CHECK PAYMENT  CK# 3858 ABA#
QUANTITY UM STEM 55 EA PC	